

Patent

Application No.: 09/822,970

Filed: March 29, 2001

For: OPEN AIR OPTICAL CHANNEL

(title)

Mail Stop Non-Fee Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an Amendment for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

X	No additional fee is required.
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The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 15	Minus	** 42	0
Indep. Claims	* 4	Minus	*** 6	0
<div style="border: 1px solid black; width: 100px; height: 40px; display: flex; align-items: center; justify-content: center;"> <div style="width: 100%; height: 100%;"></div> </div>	First Presentation of Multiple Dependent Claim(s)			

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

**** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.**

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

SMALL ENTITY		SMALL ENTITY	
Rate	Additional Fee	Rate	Additional Fee
X9	\$ -	X18	\$ 0
X43	\$ -	X86	\$ 0
+145	\$ -	+290	\$ 0
Total Add. Fee	\$ -	Total Add. Fee	\$ 0

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on December 2, 2003

Date of Deposit

Christina Fernandez

Name of Person Mailing Correspondence

Christina Lemand
Signature

December 2, 2003
Date

_____ A check in the amount of \$ _____ is attached for presentation of additional claim(s).
_____ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
_____ 37 C.F.R. § 1.136(a).

_____ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

A duplicate copy of this sheet is enclosed.

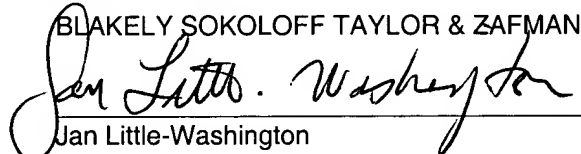
 X The Under Secretary of Commerce for Intellectual Property and Director of the United States
Patent and Trademark Office is hereby authorized to charge payment of the following fees
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 X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.

 X Any extension or petition fees under 37 C.F.R. § 1.17.

Date: 12/2/2003

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(206) 292-8600

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Jan Little-Washington

Reg. No. 41,181